TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) (FISCAL YTD TOTALS AS OF 03/31/05)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	<u>TOTAL</u> <u>PAYMENT</u>
		<u> </u>		
INPATIENT	36,305	47,455	297,723	\$186,692,912.75
OUTPATIENT	166,617	515,589	3,696,408	\$99,878,227.92
CHILD PART HOSP	0	0	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	6	42	286	\$2,286.41
SKILLED NURSING FACILITY	1,558	2,971	48,751	\$10,884,454.96
INTERMEDIATE CARE FACILITY	19,250	129,908	3,730,348	\$298,337,818.23
INTER CARE MENTAL RETARDA	2,325	20,034	590,941	\$171,264,234.16
NURSING FAC FOR MENTAL ILL	43	286	8,342	\$1,977,805.45
HOME HEALTH	20,802	94,749	1,372,072	\$52,691,822.89
LEAD INSPECTION AGENCY	86	102	102	\$35,773.77
PHYSICIAN	258,387	1,775,803	2,351,180	\$110,902,689.29
CLINIC SERVICES	65,509	177,995	164,969	\$20,422,383.07
MEP CASE MANAGEMENT	9	0	0	\$8,759.74
LAB AND RADIOLOGICAL	36,831	71,207	149,387	\$2,368,183.09
REHAB SUPPORT SERVICES	3,712	29,718	516,086	\$26,243,745.00
AMBULANCE SERVICES	11,448	17,948	17,701	\$1,913,177.82
LOCAL EDUCATION AGENCY	2,444	13,980	1,519,416	\$12,523,308.08
EARLY ACCESS SERVICES	1,211	3,050	20,674	\$411,289.45
PRESCRIBED DRUGS	268,178	5,441,807	5,088,148	\$299,016,353.51
DRUG CAPITATION	1	0	0	\$1,222.96
INDIAN HEALTH SERVICES	0	0	0	\$0.00
FAMILY PLANNING SERVICES	22,233	80,965	76,525	\$3,172,129.11
IOWA PLAN PROGRAM	323,236	2,424,894	2,424,529	\$70,891,328.15
MANAGED SUBSTANCE ABUSE	1	0	0	-\$2.00
MENTAL HEALTH ACCESS PLAN	1	0	0	-\$655.92
EPSDT SCREENING	73,340	122,726	122,604	\$7,714,687.48
HMO SERVICES	56,383	266,746	266,734	\$38,371,987.75
PATIENT MANAGEMENT	168,693	956,684	956,524	\$1,913,048.00
HEALTH INS PREMIUM PAYMENT	9,039	137,394	137,394	\$5,429,928.81
MEDICAL SUPPLIES	44,155	244,835	11,775,532	\$24,142,661.54
OTHER PRACTITIONER	37,415	96,767	375,643	\$10,381,178.03
FAMILY CENTERED PROGRAM	6,792	50,534	413,064	\$12,541,916.62
FAMILY PRESERVATION	27	27	27	\$59,347.58
TREATMENT FOSTER FAMILY CARE	1,176	10,266	49,287	\$2,088,560.95
GROUP TREATMENT THERAPY	2,047	17,815	323,108	\$20,551,656.62
DENTAL	114,212	219,619	222,413	\$29,010,242.85
OPTOMETRIST	64,770	99,353	106,111	\$5,188,347.90
CHIROPRACTIC	22,045	105,559	135,792	\$3,330,091.99
PODIATRIC	15,491	40,735	50,443	\$1,440,637.59

IOWA DEPARTMENT OF HUMAN SERVICES MEDICAID MANAGEMENT INFORMATION SYSTEM

RUN DATE 03/27/05

TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) (FISCAL YTD TOTALS AS OF 03/31/05)

	RECIPIENTS	NUMBER OF	UNITS OF	TOTAL
CATEGORY OF SERVICE	SERVED	CLAIMS	SERVICE	PAYMENT
	<u></u>			
PHYSICIAL DISABILITIES SVCS	490	4,585	113,158	\$1,504,274.79
BRAIN INJ WAIVER SERVICES	552	9,563	264,398	\$6,453,330.97
PSYCHIATRIC	9,051	45,943	56,307	\$1,842,566.46
RESIDENTIAL CARE FACILITY	2,999	21,831	624,258	\$4,770,658.68
MR WAIVER SERVICE	8,672	113,474	4,255,931	\$152,334,463.71
MR OBRA WAIVER SERVICES	0	0	0	\$0.00
AIDS WAIVER SERVICES	43	446	24,855	\$224,864.68
ELDERLY WAIVER SERVICES	8,467	133,367	2,530,948	\$27,039,648.57
ILL & HANDICAPPED WAIVER SVCS	2,054	22,801	684,414	\$11,262,470.81
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	10,302	78,641	82,020	\$17,890,727.25
UNASSIGNED	73	21	-954	\$25,897.30
ALL CATEGORIES*	388,381	13,648,235	45,643,599	\$1,755,152,444.82

Page 2 of 2 IAMM2200-R003, March 31, 2005